



Reservation Request Form

26 Oxford Street
Cambridge, MA 02138
www.hmn.harvard.edu

(617) 495-2341 *phone*
(617) 496-8308 *fax*

To expedite the reservation request process, please complete this form and email it to reservations@hmn.harvard.edu or fax to **617.496.8308**. When the request has been reviewed, you will be contacted by the education department to complete the reservation. The reservations desk is regularly staffed from 9:00 am to 1:00 pm, Monday-Friday.

Group Name: _____ Grade/Age: _____

Address: _____

Your Name: _____ Person in Charge: _____
(if different)

Phone: _____ Email: _____
(List one of the following: Work/Home/Cell)

Program: _____

List Top Three Preferred Dates: _____ Number of Classes: _____

Est. Number of Children/Adults: _____

Arrival Time: _____ Departure Time: _____

Is group bringing lunch? _____ Is wheelchair access needed? _____

What is your mode of transportation? Bus Car T Other _____

Would you like to learn more about museum programs?

How did you hear about us? _____

Comments/Questions: _____

